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# QUALITY OF LIFE AND COPING STRATEGIES IN THE COVID-19 PANDEMIC: COMPARISON ANALYSIS BETWEEN MIDDLE-AGED AND ELDERY PEOPLE

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#### **ABSTRACT**

The emergence of the coronavirus disease (COVID-19) has triggered a global public health crisis and posed an unprecedented threat to mental health worldwide. The aim of this study was to compare quality of life variables and coping strategies during the COVID-19 pandemic between two different age groups: middleaged people and elderly people. Descriptive and comparative studies were carried out. The study has a quantitative, correlational and cross-sectional design. The sample was for convenience and not probabilistic. 311 people aged over 40 years were interviewed. The following evaluation instruments were used: sociodemographic data, EUROHIS- QOL and the Coping Strategies Inventory. For the comparative study of means, the Mann-Whitney U test was used, with a significance level  $\leq 0.05$ . For the statistical study, IBM-SPSS, v. 28.0. A statistically significant relationship (p<0.001) was identified with respect to the variable satisfaction with personal relationships during the pandemic, being higher among the group of elderly people. Coping strategies were more used by the middle-aged group (p=0.050). Coping strategies: thought that the situation happened because of others (p=0.031), complained or vented to someone (p<0.001), showed hostility (p=0.018), drank and ate excessively to compensate or to forget what was happening (p<0.001), shouting and swearing (p<0.001) were more used by middle-aged people. The strategy trusted in God or in some higher being or force was more used by elderly participants (p=0.012). The expression of negative emotions was more used by the middle-aged group (p<0.001) and the inhibition of emotions as well (p=0.002). The results highlight the resilience of older adults during the COVID-19 pandemic and provide additional insight into the influence of pandemic-related stressors on age-related psychosocial functioning.

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## INTRODUCTION

Recent evidence suggests that age can substantially influence behavioral and attitudinal responses to COVID-19 (Christensen *et al.*, 2022; Hutchins *et al.*, 2020; Moore *et al.*, 2021; Minahan *et al.*, 2021), as individuals in different age groups have different needs, abilities and motivations (Araújo *et al.*, 2020; Barbore *et al.*, 2020; Bu *et al.*, 2020; Swann *et al.*, 2020). Therefore, the pandemic may have disproportionately affected different age groups (Christensen *et al.*, 2022; Hutchins *et al.*, 2020; Moore *et al.*, 2021), representing different levels of threat to individuals (Moore *et al.*, 2021). The aim of this study was to compare quality of life variables and coping strategies during the COVID-19 pandemic between two different age groups: middle-aged people and elderly people.

# MATERIALS AND METHODS

The study has a quantitative, correlational and cross-sectional design. 311 people aged over 40 years were interviewed. After approval by the Feevale University Ethics Committee, the participants of this

study were contacted for interviews. The participants signed the Free and Informed Consent Form in accordance with the norms of Resolution nº 466/2012 of the National Health Council of the Ministry of Health, which deals with research involving human beings. The assessment instruments were applied in person or via video call, depending on the conditions allowed due to the pandemic. Inclusion criteria were being over 40 years old, not being hospitalized or institutionalized. To analyze the quality of life, the EUROHISQOL instrument was used, consisting of eight items. The instrument assesses four domains: physical, psychological, social relations and environment. From these psychological domains, the global quality of life index is calculated (UFRGS, 2018). For coping strategies, the California Coping Inventory (Aldwin et al., 1996) was used, with 19 questions indicating the frequency of use of strategies focused on the problem or emotion. This instrument was adapted by Fortes-Burgos, Neri and Cupertino (2008) using the typology of Folkman and Lazarus (1980). The inventory has five factors: focus on the expression of negative emotions, behavioral excesses and risky behavior, focus on attempts to control the environment, focus on religiosity, focus on mitigating the potential stressor of the event, through avoidance behaviors, focus on in inhibition of emotions. The assessment instruments were applied in person or via video call, depending on the conditions allowed due to the pandemic. Comparative studies of means were performed using the Mann-Whitney U test, with a significance level ≤. 0.05. For the statistical study, IBM-SPSS, v. 28.0.

## RESULTS AND DISCUSSION

The study sample consisted of 158 middle-aged people with a mean age of 47.52 years (SD 5.78), with a minimum age of 50 and a maximum of 59 years. The group of elderly people consisted of 153 participants with a mean age of 69.80 years (sd. 7.06), with a minimum age of 60 years and a maximum of 88 years. Means were compared using the Mann-Whitney U test for the EUROHISQOL instrument and a statistically significant relationship (p<0.001) was identified with respect to the variable satisfaction with personal relationships (friends, relatives, acquaintances, colleagues) during the pandemic, being higher among the elderly group (Table 1).

of workspaces and personal schedules, and increased working hours, leading to increased anxiety (Lee et al., 2022). Lee, How and Xu (2022) also found that older people were the most affected by the pandemic due to their sedentary lifestyle and limited social participation. However, most elderly people in this study lived alone or with a partner and were at risk of social isolation and loneliness, factors that have been shown to be associated with an increased risk of physical health problems (such as increased blood pressure and obesity), psychological (such as depression and anxiety) and higher mortality rates (Dinapoli et al., 2014; Nicholson, 2012). Furthermore, the elderly people in this study faced disruptions in accessing preexisting clinical services during this period, which is crucial for continuity of care to manage chronic conditions and minimize hospital admissions. James et al. (2022) assessed how satisfaction with loving interpersonal relationships changed during the COVID-19 pandemicand found that relationship satisfaction was associated with the existence of supportive public policies.

Table 1. Analysis of comparison of means for the quality of life variable between the groups of middle-aged and elderly people

Variable	U Mann- Whitney	Wilcoxon W	Z	SignificanceSig. (bilateral)
Satisfaction with personal relationships (friends, relatives, acquaintances, colleagues)	9403,500	21806,500	-3,591	<0,001*

<sup>\*</sup> Statistically significant result (p<0,05).

Table 2. Comparison of means of the coping strategies variable in the groups of middle-aged and elderly people

Strategy	U Mann-Whitney	Wilcoxon W	Z	SignificanceSig. (bilateral)
Thought that the situation happened because of others	10418,500	22199,500	-2,151	0,031*
Complained or vented to someone	8689,000	20470,000	-4,375	<0,001*
Showedhostility	10250,000	22031,000	-2,366	0,018*
Drank and ate to excess to compensate or to forget what was going on	8112,500	19893,500	-5,463	<0,001*
Trusted in God or some higher being or force	10475,000	22878,000	-2,510	0,012*
Screamedandcursed	7965,500	19746,500	-5,684	<0,001*

<sup>\*</sup> Statistically significant result (p<0,05).

Trzebinski, Cabański and Czarnecka (2020) assessed the impact of life satisfaction and positivity beliefs in the social world on emotional and cognitive reactions to the COVID-19 pandemic. The authors indicate that strength of basic hope and higher levels of meaning in life and life satisfaction correlate with lower state anxiety and lower stress. Trzebinski, Cabański and Czarnecka (2020) interpret that basic hope sustains the meaning of life and satisfaction with life and the increase in these factors results in less anxiety and stress in relation to the pandemic. The study results indicate that even in the circumstances of a pandemic, life satisfaction and basic hope act as a buffer against panic reactions. Panic is counterproductive. Selfreinforcing spirals of anxiety and emotional reactions to the pandemic can result in irrational behaviors and decisions that can even be selfdefeating, especially when they have long-term consequences. For example, prolonged strong and negative emotions break social bonds (Trzebinski et al., 2020). The strong connection between state anxiety and the intensity of negative thoughts activated by the pandemic makes the occurrence of a network of emotions and self-reinforcing thoughts likely (Snyder et al., 2001). On the other hand, thoughts of positivity towards the world influence the reaction to the pandemic indirectly through the mediation of the meaning of life and satisfaction with life (Trzebin et al., 2004).

Lee, How and Xu (2022) assessed well-being during the pandemic among different age groups and observed that social support was vital for young and old adults as they looked to friends and family to regulate negative emotions around their concerns. with the virus, to stay connected or even to get financial support. Unlike young adults, middle-aged and elderly adults adhered to hygiene and distancing measures more strictly during the pandemic to deal with their fears and anxieties about the virus. Middle-aged participants experienced disruptions in work-life balance. Many had to work from home, resulting in the added burden of care and household chores, blurring

Based on an international project on COVID-19 and family life, participants included 734 married and cohabiting US parents of children under age 18. Results revealed that relationship satisfaction declined moderately compared to retrospective reports of relationship satisfaction before the pandemic. The authors identified that greater relationship satisfaction was associated with higher levels of support for social policies. At higher levels of relationship satisfaction, men and women had equally high levels of support for social policies. The COVID-19 pandemic has likely amplified facets of social inequality, which is especially concerning when considering the large socioeconomic gaps prior to the pandemic. Other recent studies comprehensively assess how the pandemic has increased stress at the individual and family levels (Brock et al., 2020), leading to increased conflict (Luetke et al., 2020; Stanley et al., 2020) and lower interpersonal support (Pietromonaco et al., 2021). In our study, the highest satisfaction rates were related to satisfaction with the conditions of the place where they live, which may be related to a higher quality of social policies and better quality of interpersonal relationships.

There is evidence that social policies, including universal health care, paid family leave, accessibility to mental health, health counseling, care for the elderly and housing assistance, affect family relationships (Lee et al., 2022). Relationship satisfaction is an individual-level factor that often interacts with societal factors. Lee, How and Xu (2022) found strong evidence that relationship satisfaction and support for social policies are positively related, thus, higher levels of relationship satisfaction are generally linked to greater support for social policies. Due to the psychological and physical vulnerability of older people (Courtetet al., 2020; Shahid et al., 2020), it is essential to gain a greater understanding of possible explanatory mechanisms, such as coping strategies, that can promote resilience. Coping strategies have been used to assess the impact of different stressful events on health-related aspects, such as illnesses, chronic pain and medical diagnoses, being associated with psychological constructs such as negative affect, depression, anxiety and well-being (Kato, 2015). The impact of the pandemic on psychosocial well-being can be understood through the stress and coping model (Lazarus & Folkman, 1984), which postulates that stress arises due to complex and dynamic transactions between an individual and his environment. This framework suggests that individuals rate the importance of stressors and rate their own perceived resources (eg, coping) to manage emotions or address the stressor in question. The same stressor stimulus is perceived differently among individuals, as stress is perceived through individual coping resources, which can lead to different psychosocial outcomes (Pearman et al., 2020). For the analysis of the coping strategies used by the two age groups (middle age and old age), the averages were compared using the Mann-Whitney U test and it was observed that the strategies: thought that the situation was the fault of others (p=0.031), complained or vented to someone (p<0.001), showed hostility (p=0.018), drank and ate excessively to compensate or to forget what was happening (p<0.001), screamed and cursed (p<0.001) were more used by middle-aged people. While the strategy trusted in God or in some higher being or force was more used by elderly participants (p=0.012). These data can be seen in Table 2. The impact of quarantine-related measures on older adults shows mixed results in the literature (Pearman et al., 2020; Klaiber et al., 2021; Montano et al., 2020; Tull et al., 2020). Pearman et al. (2020) found greater pandemic-related stress associated with higher levels of anxiety in older adults compared to younger adults. Tull et al. (2020) identified that this relationship was not age-dependent. Klaiber et al. (2021) and Montano and Acebes (2020) concluded that the use of more adaptive coping strategies was associated with a lower level of stress experienced during the pandemic and was found in older adults compared to younger adults.

Emotion-focused coping strategies such as rumination, thought avoidance, denial, self-isolation, expression of emotion and selfblame, pessimism, alcohol use, and negative social interactions have been shown to increase the severity of post-traumatic stress disorder (Naushad et al., 2019). Keser, Kahya and Akin (2020) identified depressive symptoms significantly associated with emotion-focused coping and negative attributions about the self, which related to the tendency to conflict. The authors indicate that, while depressive symptoms increase, people use more submissive and helpless coping styles, which constitutes a potential risk for interpersonal conflicts. This finding implies that individuals with depressive symptoms may not focus on conflict or conflict resolution. Instead, when they encounter a problem in the interpersonal domain, they may struggle with their submissive and helpless feelings, which can cause interpersonal communication problems and ultimately conflict (Keser et al., 2020). Therefore, the coping strategies most used by the middle-aged group in this study may be related to possible negative impacts on mental health. The positive impact on mental health was associated with optimism, pursuit of positive thinking, acceptance, humor and support in faith (Budimir et al., 2021; Naushad et al., 2019). Thus, the group of elderly individuals who participated in the present research would be more likely to have a positive impact on mental health, as they used the coping strategy of faith in some superior force, which suggests optimism in the face of the situation. Budimir, Probste and Pieh (2021) evaluated the effects of different coping strategies and quality of life indices in the Austrian population during the pandemic. The authors observed that a set of coping strategies, such as positive thinking, active coping with stress and social support, were positive predictors of psychological quality of life and well-being. These results indicate that an individual who has higher scores on these coping strategies in the COVID-19 pandemic had better mental health during confinement. Coping strategies were shown to be significant predictors for measures of mental health. Therefore, the coping strategy relied on God or on some superior being or force observed in the elderly participants (p=0.012) in this study could be related to a better response to stress. Recent work examining coping strategies corroborates this idea by demonstrating that individuals with higher levels of uncertainty related to the

pandemic were more likely to use maladaptive coping strategies, which was related to higher levels of anxiety, depression and worse subjective well-being. (Rettie et al., 2020; Wang et al., 2020; Zacher et al., 2021). It is also observed that the middle-aged population drank and ate excessively to compensate or forget what was happening (p<0.001). It is normal, in stressful situations, to observe a high intake of more palatable foods, rich in fat and sugar, including ultraprocessed foods. Dysregulation of the hypothalamic-pituitary-adrenal axis increases cortisol release and may, at least in part, explain the increased food intake (Stracket al., 1995). Social isolation exacerbated negative emotions (sadness, anxiety, fear). These emotions may be linked to food intake, mainly for compensatory purposes, generating a feeling of comfort. Higher food intake seems to be linked to the difficulty of dealing with feelings in a stressful scenario, changing food consumption. It is believed that this eating behavior alleviates the negative feelings generated by a stressful situation. High food intake of short duration has a complex etiology triggered by several social, cultural, biological and environmental factors. Several studies demonstrate that the perception of stress (i.e., social isolation) increases food intake (Chao et al., 2016; Mason et al., 2016).

For the analysis of the coping strategies used by the two age groups (middle age and old age), the means were compared using the Mann-Whitney U test and it was observed that the coping strategies were more used by the middle age group ( p=0.050). The expression of negative emotions was more used by the middle-aged group (p<0.001) and the inhibition of emotions as well (p=0.002). Dysfunctional coping mechanisms, such as avoidant coping (i.e., behaviors that individuals adopt to avoid thinking about or escaping from feelings associated with stressors), can exacerbate perceived stress and subsequently increase the risk of adverse psychosocial outcomes (Ben-Zur, 2009; Biggs et al., 2017). Minahan et al. (2021) evaluated pandemic-related stress in North American individuals aged between 18 and 92 years. They analyzed coping strategies and experiences with social distancing and concluded that social support and coping styles are directly related to psychosocial outcomes. Avoidant coping was the strongest mediator of the relationship between pandemic-related stress and psychosocial outcomes, particularly depression. Avoidant coping more strongly mediated the relationship between stress and depression in younger adults compared to older adults. The role of coping as a mediating influence on the relationship between stressors depends on how well the coping method matches stress assessments and situational conditions (Biggs et al., 2017; Folkman & Moskowitz, 2004; Lazarus & Folkman, 1984). Identifying mental health protective factors is an important step in understanding people who face health problems. Coping strategies can contribute to the nature and impact of psychological responses in stressful circumstances and can have long-term protective or harmful effects on mental health.

## CONCLUSION

There is a significant difference in the quality of life of middle-aged and elderly people. A significant difference was found in satisfaction with personal relationships, being greater among the group of elderly people. There is a significant difference in the coping strategies used during the COVID-19 pandemic by middle-aged and elderly people. The results showed a significant difference in coping strategies: thought that the situation happened because of others, complained or vented to someone, showed hostility, drank and ate excessively to compensate or to forget what was happening, shouted and cursed which were more used by middle-aged people. While the strategy trusted in God or in some superior being or force was more used by the elderly participants. The results highlight the resilience of older people during the COVID-19 pandemic and the possible associations between positive coping strategies and psychosocial well-being and indicate that older people can use unique adaptive mechanisms to preserve well-being during the COVID-19 pandemic. COVID-19. The social and cultural contexts in which the individual lives are important in assessing the impact of COVID-19. The present study provides additional information on the influence of pandemic-related stressors on psychosocial functioning and examines differences in these outcomes in relation to age, coping style and quality of life. Education about positive thinking, active coping and social support can be beneficial in dealing with declining mental health due to the COVID-19 pandemic. Further work in this direction is suggested, with longitudinal follow-up for a better analysis of the association between coping strategies and quality of life among the different age groups in the long term.

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